

## PART B - FEE(S) TRANSMITTAL

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33031 7590 03/16/2010

CAMPBELL STEPHENSON LLP  
11401 CENTURY OAKS TERRACE  
BLDG. H, SUITE 250  
AUSTIN, TX 78758

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Cyrus F. Bharucha	(Depositor's name)
<i>CBH</i>	(Signature)
6/16/10	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
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09/891,022

06/25/2001

Ali Najib Saleh

CIS0008P8US

9442

TITLE OF INVENTION: METHOD FOR RESTORING A VIRTUAL PATH IN AN OPTICAL NETWORK USING DYNAMIC UNICAST

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
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nonprovisional

NO

\$1510

\$300

\$0

\$1810

06/16/2010

EXAMINER	ART UNIT	CLASS-SUBCLASS
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CHO, HONG SOL.

2467

370-216000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
- ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
- (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Campbell Stephenson LLP

2

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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Cisco Technology, Inc.

San Jose, California

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are submitted:

- ☒ Issue Fee
- ☒ Publication Fee (No small entity discount permitted)
- ☒ Advance Order - # of Copies 1

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- ☒ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 502306 (enclose an extra copy of this form).

5. Change In Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature

Cyrus F. Bharucha

Date

6/15/10

Typed or printed name

Registration No.

42,324

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